



PENINSULA Medical Reserve Corps Policies

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Peninsula MRC Policies - Table of Contents

TOPIC	PAGE#
DECLARATION OF INTEREST IN MEDICAL RESERVE CORPS	3
1.) Introduction	4
2.) Administration	4
3.) Volunteer Responsibilities	7
4.) Recruitment, Selection and Placement	9
5.) Recognition	11
6.) Credentialing	11
7.) Training	13
8.) Activation	15
9.) Demobilization	16
10.) Communication	17
11.) Identification Cards	18
12.) Uniforms and Equipment	18
13.) Confidentiality	18
14.) HIPAA Compliance	18
15.) Liability Coverage/Legislation/Laws	19
16.) Risk Management	20
17.) Unit Contact Information	21
Appendix A: Organizational Chart	22
Appendix B: Credentialing Matrix	23
Appendix C: State and Federal Liability Coverage	24
Appendix D: HIPAA Compliance Brochure/Statement (to be signed by volunteer)	31
Appendix E: MRC VOLUNTEER Signature Sheet	33
Appendix F: MRC VOLUNTEER Background Check Authorization Form	34

DECLARATION OF INTEREST IN MEDICAL RESERVE CORPS

WHEREAS, the health and welfare of the citizens of the Commonwealth of Virginia are of the utmost importance to the Department of Health;

WHEREAS, promptly and properly responding to emergencies and disasters will likely require aid from volunteers,

WHEREAS, Virginia's Medical Reserve Corps consists of volunteers many of whom are of practicing, or retired, health care professionals who desire to assist with health emergencies and disasters; and

WHEREAS, Governor Warner has declared that "Virginia is leading the way for the building of local volunteer response programs, such as the Medical Reserve Corps, that will help make communities and neighborhoods stronger, safer and more secure."

RESOLVED, Virginia's Medical Reserve Corps and other volunteer health care activities will provide communities with volunteers who can assist local health professionals during large-scale local emergencies. This Corps will consist of practicing and retired health care professionals and others who volunteer to be on a medical reserve list. Volunteers will assist the Virginia Department of Health and health care professionals during emergencies and disasters.

RESOLVED, the Department of Health has a strong interest in the establishment and success of Medical Reserve Corps. In furtherance of this interest, the Department of Health shall establish best practices and guidelines to be followed by those Medical Reserve Corps under the supervision and control of the Department of Health.

Adopted by the State Board of Health on 7/22/2005

1.) Introduction

A. Vision:

Volunteers Protecting the Health of Virginia

B. Mission:

The PENINSULA Medical Reserve Corps mission is to augment and assist community operations during large-scale emergencies, aid in the response to pressing health care needs, and improve community emergency preparedness.

C. Purpose:

The purpose of these policies is to provide overall guidance and direction to VDH staff and Medical Reserve Corps volunteers engaged in volunteer involvement and management efforts. These policies are intended for internal management and guidance only, and do not constitute, either implicitly or explicitly, a binding contractual or personal agreement. The Medical Reserve Corps reserve the exclusive right to change any of these policies at any time and to expect, adherence to the changed policy. Areas not specifically covered by these policies shall be determined by the MRC Program Director.

D. Scope:

Unless specifically stated, these policies apply to all MRC volunteers in all projects undertaken on behalf of VDH, and the PENINSULA Medical Reserve Corps.

2.) Administration

A. Organization

The PENINSULA MRC is an emergency response and support organization. Therefore, to ensure it's compatibility with state, local and federal response processes, the PENINSULA MRC Unit shall be organized into operational and administrative components. The PENINSULA Medical Reserve Corps Unit is an asset that resides under the direct supervision of the Peninsula, and Hampton Health Departments.

B. Executive Committee:

The PENINSULA MRC Executive Committee shall consist of the following (at a minimum):

1. Executive Chairperson
2. Health Directors from each district
3. Emergency Planners from each district

C. Emergency Management Advisory Committee

The PENINSULA MRC Emergency Management Advisory Committee shall consist of: Emergency Managers or emergency management representatives from each jurisdiction covered by the PENINSULA MRC unit

1. Hospital representatives

D. Volunteer Leadership Committee

The PENINSULA MRC Volunteer shall consist of but is not limited to the following leadership positions:

1. Shelter - Medical Special Needs
2. Shelter - Pet Welfare Leaders
3. Pet Welfare
4. Volunteer Reception Center
5. Hospital Surge Capacity
6. Point of Dispensing Site
7. Education/Training
8. Recruitment
9. Special Events/Recognition/Celebrations
10. Keep the Lights On Local Health Dept.
11. Special Projects
12. Marketing
13. Technical
14. Administration

E. Roles

1. Role of the Executive Committee

The role of the Executive Committee is to provide organization and oversight to the MRC. The Executive Committee will also be responsible for overseeing the financial budget, reviewing and revising policies/procedures and communication of disciplinary actions. The Executive Committee ensures MRC operations are compliant with appropriate laws and regulations, including applicable grant requirements. The Executive Committee shall meet at least once quarterly or more as needed.

2. Role of the Chairperson of the Executive Committee

The Chairperson shall preside at all meetings of the Executive Council be responsible for preserving order and decorum, and submit recommendations and information as he or she may consider proper concerning the business, affairs and policies of the MRC.

3. Role of the Emergency Management Advisory Committee

The role of the Emergency Management Advisory Committee is to provide guidance to the MRC on how to respond to large scale emergencies. The Emergency Management Advisory Committee provides advice and input to the Executive Committee and Coordinator about local situations, community support, and matching resources to operational needs. The Emergency Management Advisory Committee shall discuss opportunities for the MRC to be involved in emergency management when medical volunteers are needed and community emergency preparedness events. The Health Director responsible for the area of the meeting location shall preside over the Emergency Management Advisory Committee. The committee shall rotate the locations of the quarterly meetings among the three health districts.

4. Role of the Citizen Corps Councils

Citizen Corps Councils representing of the cities or counties of the PENINSULA MRC may provide input to the MRC Coordinator about the MRC unit activities. The MRC Coordinator, or a MRC appointed representative, shall attend the Council meetings to represent the PENINSULA MRC. If available the PENINSULA MRC may request and be granted funding from local citizen councils. The Citizen Corps Councils and the PENINSULA MRC may collaborate on special projects and volunteer training.

5. Role of the Volunteer Leadership Committee

The role of the Volunteer Leadership Committee is to coordinate volunteer activities, provide updates on special projects, and assist the Coordinator in preparing for emergency drills and training. Members of the Leadership Committee should take an active role in recruiting volunteers and promoting the MRC program. Leadership responsibilities will vary based on the current unit operations. The MRC Coordinator shall determine the responsibilities of each leader.

6. Role of the MRC Director

The role of the MRC Program Director is to be the central point of contact for the national MRC program office, and Virginia AmeriCorps or VISTA programs. The MRC Program Director provides advisory information to the MRC, Executive Committee. The MRC Program Director delegates duties to the MRC Coordinator and Assistant Coordinator. The MRC Program Director performs other duties as required. The Peninsula Emergency Planner acts as the MRC Director.

7. Role of the MRC Coordinator

The role of the MRC Coordinator is to provide a central point of contact for volunteer management within the unit, provide advisory information to the PENINSULA Executive Committee, Emergency Management Advisory Committee, and the Citizen Corps Councils on unit progress and operations. The Coordinator serves as the overall leader and spokesperson of the PENINSULA MRC. The Coordinator acts as the representative for the PENINSULA MRC unit at Citizen Council and VOAD meetings, for the MRC National program office, the VA MRC and the Chair of the Volunteer Leadership Committee. The Coordinator is responsible for the recruitment, management, and training of the volunteers. The Coordinator delegates duties to the Assistant Coordinator and MRC volunteers and performs other duties as required.

8. Role of the MRC Assistant Coordinator

The role of the Assistant Coordinator is to provide support to the Coordinator in recruiting, managing, and training volunteers. The Assistant Coordinator position will be filled by AmeriCorps, VISTA, or MRC volunteer. The duties of the Assistant will be directed by the Coordinator. The Director will act as the site supervisor.

F. Definition of MRC Volunteers

A "MRC volunteer" is anyone who without compensation or expectation of compensation performs a task at the direction of and on behalf of the MRC unit. A "MRC volunteer" must be officially accepted and enrolled by the organization prior to performance of any task. Unless specifically stated, MRC volunteers shall not be considered as 'employees' of the Commonwealth of Virginia.

G. Relationship of Volunteers to the Unit

VDH accepts the service of all MRC volunteers with the understanding that such service is at the sole discretion of the agency. MRC volunteers agree that VDH may at any time, for whatever reason, decide to terminate the MRC volunteer's relationship with the agency.

The MRC volunteer may at any time, for whatever reason, decide to sever the volunteer's relationship with the MRC. Notice of such a decision should be communicated as soon as possible to volunteer's supervisor or MRC Volunteer Coordinator.

MRC volunteers wishing to serve multiple volunteer organizations, such as CERT or VIPS, must indicate on the registration form which organization which they will be primarily affiliated with and will first respond to in times of an emergency.

H. Volunteer Rights and Responsibilities

MRC volunteers are viewed as a valuable resource to this organization, VDH, its staff, and clients. MRC volunteers shall be extended the right to be given meaningful assignments, the right to be treated as equal co-workers, the right to effective supervision, the right to full involvement and participation, and the right to recognition for work completed. In return, MRC volunteers shall agree to actively perform their duties to the best of their abilities and to remain loyal to the goals and procedures of the Medical Reserve Corps.

3.) Volunteer Responsibilities

Volunteers expect, and enjoy, certain rights when they donate their time. Volunteers, however, also have specific responsibilities to the Medical Reserve Corps. As a volunteer you will be free (outside of emergencies) to set your own work schedule and you must be prepared to fulfill the commitments you make.

1. You must be dependable, reliable, and businesslike, and abide by the policies of the Corps.
2. Dress appropriately for the setting and the task at hand.
3. Carry out duties in a safe and responsible way.
4. Maintain the confidentiality of information revealed to you regarding clients and coworkers.
5. Keep track of the hours you work on the official form provided.
6. You must be non-discriminatory in serving all people regardless of race, gender, age, religion, sexual orientation, or disability.
7. Work within the guidelines of your job description and accept supervision.
8. Offer feedback and suggestions.
9. Be prepared for any regularly scheduled meetings.
10. You must represent the PENINSULA Medical Reserve Corps appropriately in the community.
11. You must always be honest, respectful, and responsible.

I. Code of Conduct

In an effort to maintain the high standard of conduct expected and deserved by the American public and to enable the organization to continue to offer services required by those in need, the MRC operates under the following Code of Conduct, applicable to all volunteers.

No volunteer shall:

1. Authorize the use of or use for the benefit or advantage of any person, the name, emblem, endorsement, services, or property of the Medical Reserve Corps.
2. Accept or seek on behalf of himself or any other person, any financial advantage or gain of other than nominal value which may be offered as a result of the volunteer's affiliation with the Medical Reserve Corps.
3. Publicly utilize any Medical Reserve Corps affiliation in connection with the promotion of partisan politics, religious matters, or positions on any issue not in conformity with the official positions of the Citizen Corps.
4. Not disclose of any confidential Medical Reserve Corps (MRC) information that is available solely as a result of the volunteer's affiliation with the MRC to any person not authorized to receive such information, or use to the disadvantage of the Medical Reserve Corps any such confidential information, without the express authorization of the MRC.
5. Knowingly take any action or make any statement intended to influence the conduct of the Medical Reserve Corps in such a way as to confer any financial benefit on any person, corporation, or entity in which the individual has a significant interest or affiliation.
6. Operate or act in any manner that is contrary to the best interests of the Medical Reserve Corps.
7. In the event that the volunteer's obligation to operate in the best interests of the Medical Reserve Corps conflicts with the interests of any organization in which the individual has a financial interest of an affiliation, the individual shall disclose such conflict to the Medical Reserve Corps Director upon becoming aware of it, shall absent himself or herself from the room during deliberations on the matter, and shall refrain from participating in any decisions.

J. Maintenance of records

A system of records will be maintained on each volunteer with the Medical Reserve Corps, including dates of service, positions held, duties performed, and training completed, copy of current licensure/certifications, evaluation of work, and awards received. MRC Volunteers and appropriate staff shall be responsible for submitting all appropriate records and information to the Volunteer Coordinator in a prompt and accurate fashion. MRC Volunteer personnel records shall be accorded the same confidentiality as staff personnel records.

Records for the PENINSULA MRC shall be maintained at the Health District Headquarters located at 416 J. Clyde Morris Blvd, Newport News, Virginia. A volunteer, with proper identification may request a report of the contents of their record at any time.

K. Contact Information

All contact information must be kept up-to-date. *Volunteers are required*, as a part of their volunteer responsibilities, to keep their contact information up to date, or to notify the Volunteer Coordinator of any changes in phone numbers, address, e-mail address or pager number. Keeping information updated is most critical for emergency response.

L. Safety

The reduction of personal injury and equipment damage in the workplace is essential to an efficient operation. Be aware of safety issues at all times. Report any hazards to the Volunteer Coordinator. Report any injury immediately to the Incident Commander or your supervisor. The PENINSULA MRC unit is not able to provide Worker's Compensation coverage at this time.

M. Conflict of Interest

No person who has a conflict of interest with any activity or program of the agency, whether personal, philosophical, or financial shall be accepted or serve as a volunteer with the agency.

L. Supervision and Evaluation

1. Requirement of a Supervisor

Each MRC volunteer who is accepted to a position with the Medical Reserve Corps must have a clearly identified supervisor who is responsible for direct management of that volunteer. This supervisor shall be responsible for management and guidance of the work of the volunteer, and shall be available to the volunteer for consultation and assistance. Additional supervisory personnel can be added as membership increases in order to maintain a proper span-of-control.

2. Volunteer/Staff Relationship

Volunteers and staff are considered to be partners in implementing the mission and programs of the PENINSULA MRC, with each having an equal but complementary role to play. It is essential for the proper operation of this relationship that each partner understands and respects the needs and abilities of the other.

4.) Recruitment, Selection and Placement

A. Recruitment

Volunteers may be recruited by way of Hospitals, clinics, local health businesses, Department of Health Professions, Schools, and the like. Volunteers shall be recruited, selected and placed without regard to race, color, religion, sex, national origin, age, disability, veteran status or other non-job related factors to comply with all federal and state nondiscrimination, equal opportunity action laws, orders, and regulations.

Recruitment efforts shall consist of flyers, newsletters, TV/radio, attendance at local functions such as health fairs, and the like.

B. Criteria

1. Any person 18 years of age or older is eligible for membership in the PENINSULA MRC. Persons younger shall need the authorization of the LHD Director.
2. Current medical licensure is not required for membership in order to serve in a non-medical capacity.
3. Certain positions in the MRC, however do require active medical licensure in order to provide health and medical services to the public.
4. Individuals with no medical background are allowed to join the MRC unit.
5. Volunteers may be subjected to a background check free of any criminal charges to serve in certain roles (i.e. shelters). See Appendix E – Authorization Form, or VVHS will provide pre-authorization statement (future).

C. Volunteer Process

The following is the procedure for joining the PENINSULA Medical Reserve Corps:

Completion of Volunteer Registration application via VVHS at www.vdh.virginia.gov/mrc/ website

- Orientation – 1.5 hours, classroom or on-line
- Credentialing - Photo copies of:
 - >Medical Professional license if applicable
 - >Driver's license
 - >Social Security card
 - >CPR and First Aid, for Medical Professionals
 - >Signed HIPAA form for VDH, or on-line initialed acknowledgement
 - >Signature Page acknowledging Orientation, Policies, HIPAA, Liability, or on-line initialed acknowledgement
 - >Background Check Authorization Form, or on-line acknowledgement at time of VVHS application
- Additional screening requirements, in addition to a background check, may be required as determined by the MRC Coordinator or LHD Director according to volunteer job requirements.
- A picture will be taken following Orientation training. An ID Badge will be provided once a successful background check is completed.

D. Placement

Volunteers shall be placed in a position with special attention paid to their interests, capabilities and/or medical training and suitability for the role they will perform.

- For those seeking placement on specialized teams, an interview shall be conducted by the MRC Coordinator or designee to determine fit.
- For those seeking leadership positions in the MRC, the addition of a personal interview with MRC leadership, and additional training will also be required.

E. Performance

Volunteers shall be held to the same standards in performance as a VDH employee.

- Volunteers may be given an opportunity following an activation (event, exercise, emergency response, etc.) to evaluate their experience.
- Volunteers may also be evaluated on their performance using a standardized performance tool.

- The Medical Reserve Corps reserves the right to re-position volunteers based on their performance and demonstrated skill set.

5.) Recognition

As grant budgetary funds permit, PENINSULA MRC Volunteers who have met and exceeded their position requirements will be recognized during a yearly volunteer leadership meeting held in April during Volunteer Appreciation Week, or during a collaborative Volunteer Disaster Day with other disaster organizations. Volunteer awards will be broken down into the following categories:

A. Leadership Award

The Leadership award will be presented to the volunteer who has gone above and beyond the call in obtaining a leadership position in the unit through training, exercises and actual responses (if applicable). This individual will have additional training in leadership, Incident Command, and Management above the requirements of their position. This individual will have exhibited a can-do attitude to any challenge or mission presented to them.

The Leadership award will be via ballot submitted by those that serve under that respective leader. Ballots shall be submitted to the executive committee no later than November 30th, of the calendar year. The executive committee will then select the appropriate candidate.

NOTE: There may be multiple awardees of this accolade as the MRC expands its membership.

B. Volunteer of the Year Award

This award will be presented to the volunteer from the MRC unit who has the most hours of logged time for that year within the unit. This can be accomplished through training, exercises, responses, special projects, or any combination. Those in leadership positions are exempt from this award. The member time sheets will be evaluated in November of each year. There will be three awards issued under this category. 1st, 2nd, 3rd. These will be the MRC volunteers with the top three most accumulate hours logged with the unit for that calendar year.

C. Other Awards

Volunteers may be nominated for miscellaneous awards such as Citizen Corps Council Super Star Awards.

6.) Credentialing

See matrix in Appendix B for guidance. Additional core competencies training outline is available on the Peninsula MRC web-site, or included with the orientation. Credentialing should be based on the position the volunteer will be performing for the MRC, not the volunteer's professional status.

National MRC guidelines state that local MRCs are responsible for validating volunteer's credentials, including their education and licensure. State licensing agencies and others can assist with validation of credentials.

Special programs credentialing shall be done in cooperation with the entity for which the volunteer will be participating such as MRC Hospital Emergency Response Team (H.E.R.T.). Certain program credentials that are held by the entity and required of the volunteer will be handled by the entity and communicated to the MRC.

Regular service Volunteers (pre-registered and trained)

Licensure – Volunteers, who are medical professionals and may be performing medical care, will be required to produce their current medical license which will be copied and a copy will be kept in the volunteer's personnel file. Licensure should also be verified through the Virginia Department of Health Professionals.

State VDH Employee Screening Sensitivity Levels:

- Level 1: Involves the expectation of public trust, or pose a significant degree of risk to patients, clients or the mission of the agency.
- Level 2: Involves a higher expectation of public trust, posing a greater risk of causing damage to the public or the mission of the agency or posing a significant risk for realizing personal gain from the public's business.
- Level 3: Involves an unusually high expectation of public trust, pose an unusually high risk for causing extensive damage to the public or the mission of the agency or pose an unusually high risk for realizing personal gain from the public's business.

National HRSA Screening Sensitivity Levels:

- Type 1: Medical Professional – unencumbered license, degree, certification, active clinical practice, active clinical privileges, national practitioner databank status, DEA license, Inspector General Status
- Type 2: Medical Professional - unencumbered license, degree, certification, active clinical practice, national practitioner databank status, DEA license verification, Inspector General Status
- Type 3: Medical Professional – Unencumbered license
- Type 4: Other – not specified

Adjusted VAMRC levels (based on job duties and position with MRC):

- Level 1: Positions requiring medical licensure/high level of sensitivity/leadership
- Level 2: Positions requiring medical licensure/some sensitivity/management
- Level 3: Positions requiring non-medical, low or no sensitivity

Background checks – These are recommended for all volunteers as funding permits, but are required by HRMMRS for all volunteers (as of 2012 funding allocation). If funding does not permit a formal background check, volunteers should be checked against the Sex Offender Registry at a minimum.

However, for practical purposes the VDH recommends that volunteers in leadership, highly sensitive positions (MRC level 1) complete background screening. It is also strongly recommended that volunteers in management positions (MRC level 2) complete basic background checks. MRC level 3 positions may not be subject to background checks when they will serve only under direct VDH supervision.

Reference checks – state sensitivity level 2 and 3 may be required to have references checked. Level 1 or 0 may perform reference checks on position by position basis. MRC levels 1 and 2 should be checked.

Education checks – these may be required to verify licensure, education or other necessary qualification for specific positions.

Physical Ability checks - National MRC guidelines state that volunteers should be in good health, should have documentation that includes the results of a physical exam, and an assessment of their safe activity level in order to ensure that they are assigned to duties matching their fitness levels. Volunteers should have current immunizations such as Tetanus, TB, and Hepatitis B.

Special Service Volunteers or SUVs (possibly in database, not trained)

Depending on the situation, these volunteers may be subject to all of the above credentialing, depending on position and timing of event. Upon emergency declaration by the Governor of the Commonwealth of Virginia, state guidelines for emergency personnel will be followed.

Special service or SUV volunteers (MRC Level 4) will not be included in engagement or emergency opportunities unless the need for additional resources warrants their involvement. They will be filtered through a Volunteer Reception Center, MRC process for credentialing, training, and placement if needed.

7.) Training

Training is the gateway to serving with the Peninsula Medical Reserve Corps. Much time and effort goes in to hosting training, and sometimes instructors travel long distances to provide training, typically free of charge, and often pre-empting their own work or personal schedule.

- When you receive a training alert and you click on available, your name is added to the roster and the instructor is expecting you.
- It is your responsibility to mark your calendar; training reminders are NOT provided.
- No show for training is subject to review and determination of removal from the Corps.

The Peninsula MRC receives all of its funding from grants. Grants are relied upon to support the operation of the entire MRC Unit, as well as specialized programs that help augment and support the health, preparedness, and resiliency of the Hampton and Peninsula communities. In 2012, grant consideration will no longer be given on total number of volunteers recorded in VVHS, but only on the number of volunteers who have completed the Peninsula MRC Orientation, background check, AND FEMA ICS-100, and are then considered deployable assets. Additionally since VDH is a NIMS (National Incident Management System) compliant organization, training in FEMA ICS-700 is also required:

Peninsula MRC Orientation - For new volunteers and for those who have never had the Orientation, classes are offered routinely; please watch email for a training alert and register. Orientation is also available on-line with a mandatory post-test review. Volunteers must still report to the Peninsula MRC Office to obtain a badge following successful completion of Orientation.

ICS-100 <http://training.fema.gov/emiweb/is/is100b.asp>

ICS-700 <http://training.fema.gov/EMIWeb/is/is700a.asp>

We do not have access to the FEMA database; to ensure proper credit for the course, please send the .pdf certificate(s) following the course test by email to the Peninsula MRC Office.

The training listed below is based on MRC National Recommendations. Please see the 'Training Matrix' tab in the Orientation Manual, visit the Peninsula MRC Website or TRAINVirginia <http://va.train.org> for most current training matrix.

A. Domain Level I Training

Level I training provides a basic foundation of knowledge and skills for MRC volunteers. Volunteers should take the following courses or similar courses in:

- MRC Orientation
- MRC Introduction to Terrorism
- MRC Introduction to Disasters
- Be Aware & Prepared: Family Emergency Preparedness Planning
- Terrorism Security Awareness Orientation for Public Health *
- Participation in one Point of Dispensing Drill a year. Volunteers may attend POD Drills coordinated by other MRC units in Hampton Roads.

First Aid & CPR is strongly encouraged for non-medical volunteers as a matter of personal preparedness and is required for medical volunteers in order to provide medical care (i.e. vaccinations).

Level I training should not exceed 10 hours not including the POD Drill and should be completed within one year. * Indicates online or self-study courses

B. Domain Level II Training

Volunteers should complete a minimum of five electives specific to the role they will fulfill as a volunteer. The list is not limited to those below.

MRC Emergency Shelter Staff should complete:

- ARC Introduction to Disaster Services *
- ARC Mass Care
- ARC Community First Aid & CPR
- Disaster Mental Health
- OSHA

POD Site Leaders should complete:

- POD Site Leadership Training
- IS 100 & 200 – Incident Command System *
- Volunteer Management *
- 2 hours of POD coordination prior to the POD drill
- Lead a team during a MRC POD drill

MRC Educators should complete:

- MRC Public Information Officer
- Volunteer Management *
- MRC Community Emergency Preparedness Train-the-Trainer
- MRC Orientation Train-the-Trainer

General electives may include any of the above courses and courses from the following areas:

- Epidemiology
- Emergency Operations
- Emergency Response for Special Needs, Disabled Populations, Children & Animals
- Emergency Medical Treatment (BDLS, ADLS, Mass Casualty)

Additional electives and focus areas may be offered or approved by the MRC unit.

Level II training should not exceed 20 hours and should be completed within 3 years.

* Indicates online or self-study courses

C. Just-In-Time Training

It is impossible to train every person for every possible contingency due to time constraints and the amount of material needing to be covered. During certain types of emergencies it will be necessary to conduct just in time training to MRC volunteers. Just in time training contains information that is specific to the incident occurring, special considerations for dispensing medications or vaccines, job duties, etc.

D. Training Records:

All MRC volunteers are responsible for providing documentation of any training they take required or additional. Training records are maintained by the MRC Coordinator in VVHS, or by the TRAINVirginia user if an account is available. MRC volunteers will be presented with an individual training record upon written request.

Any certificates or acknowledgement of training must be copied and promptly submitted to the MRC leadership for placement in the volunteer's personnel file.

F. Non compliant volunteers:

Volunteers who do not comply with the required training may be subject to review and removal from the Corps if deemed they are not a committed resource, thus not considered a deployable asset.

8.) Activation

Volunteers are utilized in emergency and non-emergency events in a medical or non-medical (support) capacity, depending upon qualifications and training, and current credentials. Volunteers can be activated for an emergency or non-emergency via the Virginia Volunteer Health System alerting system – phone or email.

The Medical Reserve Corps is an extension of the Peninsula Health District and Hampton Health District. Volunteers must follow ALL rules and regulations for the deployment of emergency personnel. At NO time will any member of the PENINSULA MRC volunteer self-deploy to any emergency. In the event a PENINSULA MRC volunteer self-deploys to an incident without being activated, dispatched and deployed through the procedures outlined in this document, it will constitute a breach of the MRC code of conduct and the individual(s) will be immediately terminated from service with the PENINSULA MRC.

Field Service in Emergencies, Public Health Outreach, or Exercises:

Volunteering is serious business for Peninsula Medical Reserve Corps and volunteers are relied upon more and more by those in our communities. If alerted to serve, and you have expressed you are available, and have received your official deployment instructions from the MRC office, you are expected to attend the event or incident, and you are likely fill a critical role.

- Please show up. Not being there has a domino effect on the ability to provide critical and timely services.*
- No shows damage the reputation, reliability, and integrity of the Medical Reserve Corps organization, and place a heavier burden on other volunteers and staff.*
- We understand life happens, but you must call your assigned supervisor (or MRC office) as soon as possible if you are unable to follow through on your commitment. The sooner you do the easier it is to back-fill your slot.*

- *No showing for an event is subject to review and determination of removal from the Corps.*

A. Intra-district Activation

When a decision is made to active the Emergency Operations Plan (EOP) for any locality or jurisdiction, the Public Health or Citizen Corps representative at the Emergency Operation will notify the MRC Coordinator of the need to activate the MRC. The health director will then provide the following information to the person activating the team:

1. Nature and scope of the emergency
2. Location(s) to which volunteers are to report
3. Estimated numbers and types of volunteers needed

After receiving notification from the EOC Representative, the MRC Coordinator will then activate the appropriate MRC resources. The MRC Coordinator will make contact with the MRC unit leaders or individual volunteers.

When possible for safety and security reasons it may be necessary to assemble volunteers at a staging area and transport as many team members to their operational destination.

B. Inter-district Activation

Should MRC volunteers be needed in another area of the Commonwealth, the above procedure will be followed in accordance with the state Emergency Operations Center and the Virginia Department of Health Emergency Coordination Center (ECC) and the VDH Emergency Mobilization Plan.

C. Interstate Activation

In certain emergencies of regional or national significance, MRC resources MAY be needed to assist outside the Commonwealth. In the event of an incident of this type (example: Hurricane Katrina, national security emergency, etc.). This will require activation of an Emergency Management Assistance Compact (EMAC). This is a request for resources from another state and must come under an official disaster declaration and will be coordinated through the State Emergency Operations Center. The state EOC will then filter the request to the local MRC's and may partner them with existing resources (Red Cross, etc.) During an EMAC request the same activation procedure will be followed. MRC volunteers may also register with the Department of Health and Human Services to be deployed nationally as a federal volunteer.

9.) Demobilization

The MRC volunteers will support emergency, public health, other personnel, and operations for the duration of an incident or as long as their services are needed. It is possible that some MRC volunteers will be demobilized before others as their assignments are completed.

Demobilization will take place at the discretion of the Incident Commander and the Incident Action Plan or as dictated by specific incident needs and priorities.

When demobilization commences MRC volunteers should ensure that the following objectives are completed:

- Ensure all assigned activities are completed
- Determine whether additional assistance is required
- If within the scope of one's assignment, help ensure all injured personnel, patients, victims and fatalities are properly processed, disposition and transported to the appropriate facility
- Account for all issued equipment, supplies, and other MRC volunteers
- Clean up debris or trash associated with MRC assignments
- Check out with the Incident Commander, Task Force or Strike Team Leader, or other health department personnel before leaving the scene or site.
- Report hours to their local MRC Unit
- Complete an evaluation form with the MRC Volunteer Coordinator

10.) Communication

Routine Communications

In non-emergency situations, the PENINSULA MRC will communicate with MRC volunteers through normal lines such a phone, fax, and e-mail, or VVHS non-emergency alerts.

All PENINSULA MRC volunteers are responsible for providing contact information to the health district liaisons and/or MRC Volunteer Coordinator in order to ensure the most current contact information is available.

A. Website

The PENINSULA MRC unit will maintain a website thru the VDH MRC. The address for the website is www.vdh.virginia.gov/mrc/peninsula. Every effort will be made to keep the website up-to-date.

B. Newsletter

As time and funds permit, the PENINSULA will provide it's members with a quarterly newsletter distributed via email. Volunteers are encouraged to submit articles and assist in producing the email.

C. Email

Volunteers must provide the MRC with an email address, and check their email routinely as they will receive communication from the unit weekly and monthly and as non-emergency opportunities arise via email. *It is necessary for MRC volunteers to notify the coordinator when any changes are made to their email address.*

D. Emergency Communications

During emergencies volunteers may be contacted using the state notification system, Virginia Volunteer Health System alerts, email, and phone trees. All volunteers should follow the procedures for MRC Activation using the Incident Command System ESF #8 function and the National Incident Management System.

E. Medical Reserve Corps Logo

The MRC logo is only for official MRC use. The use must be applied for and approved for use through the Office of the Surgeon General. The PENINSULA MRC Coordinator is responsible for submitting all requests regarding the use of the MRC logo.

Public Information

All requests by the media SHALL be directed to the MRC Coordinator and the Health District Director and the regional VDH Public Information Officer. At NO time is any member of the MRC permitted to discuss MRC operations with the media without permission from the Health District Director, the Incident Commander, or the MRC

Coordinator. Only those volunteers who have completed the PIO training for volunteers will be allowed to speak to the media.

11.) Identification Cards

All PENINSULA MRC deployable/deployed volunteers will be issued an Identification card/badge upon completion of the PENINSULA MRC Orientation and successful background check. This badge must be carried at all times especially in times of an emergency. MRC volunteers may not be admitted into scenes of disaster and emergencies or facilities without proper ID.

12.) Uniforms and Equipment

During an emergency event volunteers may be provided vests with reflective tape for the purpose of identification and safety. Volunteers may, depending on available supplies receive volunteer go-bags that contain personal safety equipment useful in their job responsibilities.

While there is no standard uniform, it is expected for MRC volunteers to present themselves in a professional manner of dress at all times while operating under the MRC, therefore the VDH Peninsula Health Center attire policy is in effect. Volunteers may request a copy from the MRC Volunteer Coordinator. If a Peninsula MRC shirt has been issued, it is expected attire at an emergency or non emergency event. If a shirt has not been issued, a simple red shirt can be worn. Volunteers should also take into account for duty locations, hours of service and weather conditions and adjust their dress accordingly.

13.) Confidentiality

Volunteer Information - Protection of volunteer information will be respected by the MRC leadership, staff, and volunteers. Information will be shared on a "need to know" basis.

SNS and Dispensing Site locations shall be kept confidential by MRC volunteers and shared on a "need to know" basis.

14.) HIPAA Compliance

The volunteers shall read and sign a copy of the HIPPA statement. The signed HIPPA statement should be filed in the volunteer file and kept as a matter of record.

HIPAA Guidelines state:

- As volunteer performing duties, for the Medical Reserve Corps, you will have access to the protected health information (PHI) of the patients.
- Federal and state laws, including HIPPA and the policies and procedures of the Virginia Department of Health, protect the privacy and security of this PHI.
- It is illegal for you to use or disclose PHI outside the scope of your volunteer duties for the Medical Reserve Corps. This includes oral, written, or electronic uses and disclosures.
- You may use PHI as necessary PHI to carry out your duties.
- You may only share PHI with other health care providers for treatment purposes.

- You may **NOT** photocopy PHI.
- You must access only the minimum amount of PHI necessary to care for a patient.
- You may NOT record PHI (such as patient names, diagnoses, dates of birth, addresses, phone numbers, etc.) on any reports you may need to turn in to your program, or forms you may need to take with you.
- You may only access the PHI of patients for whom you are caring/when there is a need for the PHI.
- Be aware of your surroundings when discussing PHI. For example, because others may overhear you, it is inappropriate to discuss PHI in bathrooms, lunch areas or in any other public place.
- Shred non-necessary PHI, do not dispose of it in the public trash.
- At a dispensing site it is important to obtain the PHI as discreetly as possible.

15.) Liability Coverage/Legislation/Laws

Persons who volunteer to serve in a Medical Reserve Corp Unit (MRCU) could be protected from liability for injuries to persons treated by the MRCU through several Virginia statutes as well as the Federal Volunteer Protection Act. (See Appendix C for further details on State and Federal laws)

A. State Laws

- Ø **Virginia Code § § 8.01- 225 et seq., the “Good Samaritan Act”**
 - o MRCU volunteers should be immune from liability for harm caused when providing emergency care to ill or injured persons at the scene of an accident, fire or any life-threatening emergency.
- Ø **Virginia Code § § 44-146.13 et seq., the “Commonwealth of Virginia Emergency Services and Disaster Law of 2000”**
 - o During a declared emergency, MRC volunteers will be immune from liability for harm caused when providing medical and health services so long as they are doing so under supervision of the MRCU.
 - o Additionally, during a declared emergency, those volunteers who are licensed or certified to render health care services will receive immunity when they gratuitously render aid using their skills.
- Ø **Virginia Code § § 2.2-3600 et seq., the “Virginia State Government Volunteers Act”**
 - o MRC volunteers may enjoy the protection of the Commonwealth's sovereign immunity if they are deemed to be a volunteer of a state agency, such as VDH.
- Ø **Volunteer Protection Act**
 - o Volunteers will not be liable for economic harm caused during the performance of volunteer activities so long as the activities are within the scope of the volunteer's responsibilities to the MRCU.
- Ø **Virginia Code § 32.1-48.016 “ Immunity from liability” – March 2005, Effective July 1, 2005**
 - o Any person, including any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established

under Virginia CORPS, who, in good faith and in the performance of his duties, acts in compliance with this article and the Board of Health's regulations shall not be liable for any civil damages for any act or omission resulting from such actions unless such act or omission was the result of gross negligence or willful misconduct.

In addition, Virginia courts have established the doctrines of charitable immunity and sovereign immunity. Both of these doctrines are partially applicable to MRCU volunteers. Under the doctrine of charitable immunity, MRCU volunteers may be immune from liability for harm caused while acting within the scope of their duties to the MRCU because the MRCU is a not-for-profit organization. Sovereign immunity may immunize MRCU volunteers if a court finds that they are agents of the Commonwealth. None of these statutes or doctrines were specifically written with MRCU volunteers in mind. Therefore, they do not provide absolute immunity.

B. Federal Laws

The federal government has given certain liability protection to narrow group of health service providers under a Homeland Security Act declaration by Health and Human Services. During declared emergencies there is some protection under the Good Samaritan Act and the Volunteer Protection Act.

16.) Risk Management

MRC volunteers who are registered with the Virginia Department of Health are entitled to the benefits described in § 2.2-3605 of the Code of Virginia. While they are acting under the direction of the Virginia Department of Health, and within the course and scope of their assigned emergency and disaster response activities, volunteers are eligible for the same liability protection available to state employees. In addition to this protection, if a volunteer is injured while performing an assignment the state may also provide up to \$10,000 reimbursement for medical expenses.

For volunteers to be covered under the State's liability, they must:

- ✓ Be registered as a member of an organized MRC Unit
- ✓ Demonstrate comprehension of basic emergency competencies
- ✓ Be "Officially deployed" by MRC Coordinator or designee
- ✓ Act under the direction of the VDH or other state agency, and assigned site supervisor
- ✓ Follow the policies and protocols of the MRC Unit or VDH
- ✓ Act within the scope of their education and experience and within the confines of their training.

In the event of a claim (or potential claim) immediately notify:

Your immediate supervisor or acting state agency director who should send a report of the incident to VDH Human Resources within 48 hours

AND

The Virginia Department of the Treasury
Division of Risk Management--Claims
P. O. Box 1879
Richmond, VA 23218-1879
Phone: 804-786-3152
Fax: 804-371-2442
Visit DRM: www.trs.virginia.gov

Provide Risk Management with:

- ✓ Current contact information for the volunteer
- ✓ Documentation of the Volunteer's assignment
- ✓ Name of MRC Unit, date, duration of the assignment, services provided by volunteer
- ✓ Supervisor contact information (or other authorizing personnel)
- ✓ A complete description of the incident, injury or damage
- ✓ Names and contact information for witnesses
- ✓ When applicable – All notices of claim, demand, summons or other process received
- ✓ Time lines do apply. Please do this as soon as possible, following the incident.

17.) Unit Contact Information

The Headquarters for the PENINSULA MRC unit is located at:
416 J. Clyde Morris Blvd, Newport News, VA 23601

Website: <http://www.vdh.virginia.gov/mrc/peninsulamrc>
Unit email: [N/A](#)

Teresa Blakeslee **MRC Coordinator**

Virginia Dept. of Health - Peninsula Medical Reserve Corps
416 J. Clyde Morris Blvd. | Newport News, VA 23601
Cell: 757-570-2918 | Main: 757-594-8045
Fax: 757-594-8612

Teresa.Blakeslee@vdh.virginia.gov

PenMRC Website: <http://www.vdh.virginia.gov/mrc/peninsulamrc>

VVHS: <https://vms.vdh.virginia.gov/vms/default.jsp?main=req>

TRAINVirginia: <http://va.train.org>

 Peninsula Medical Reserve Corps

 @PeninsulaVAMRC

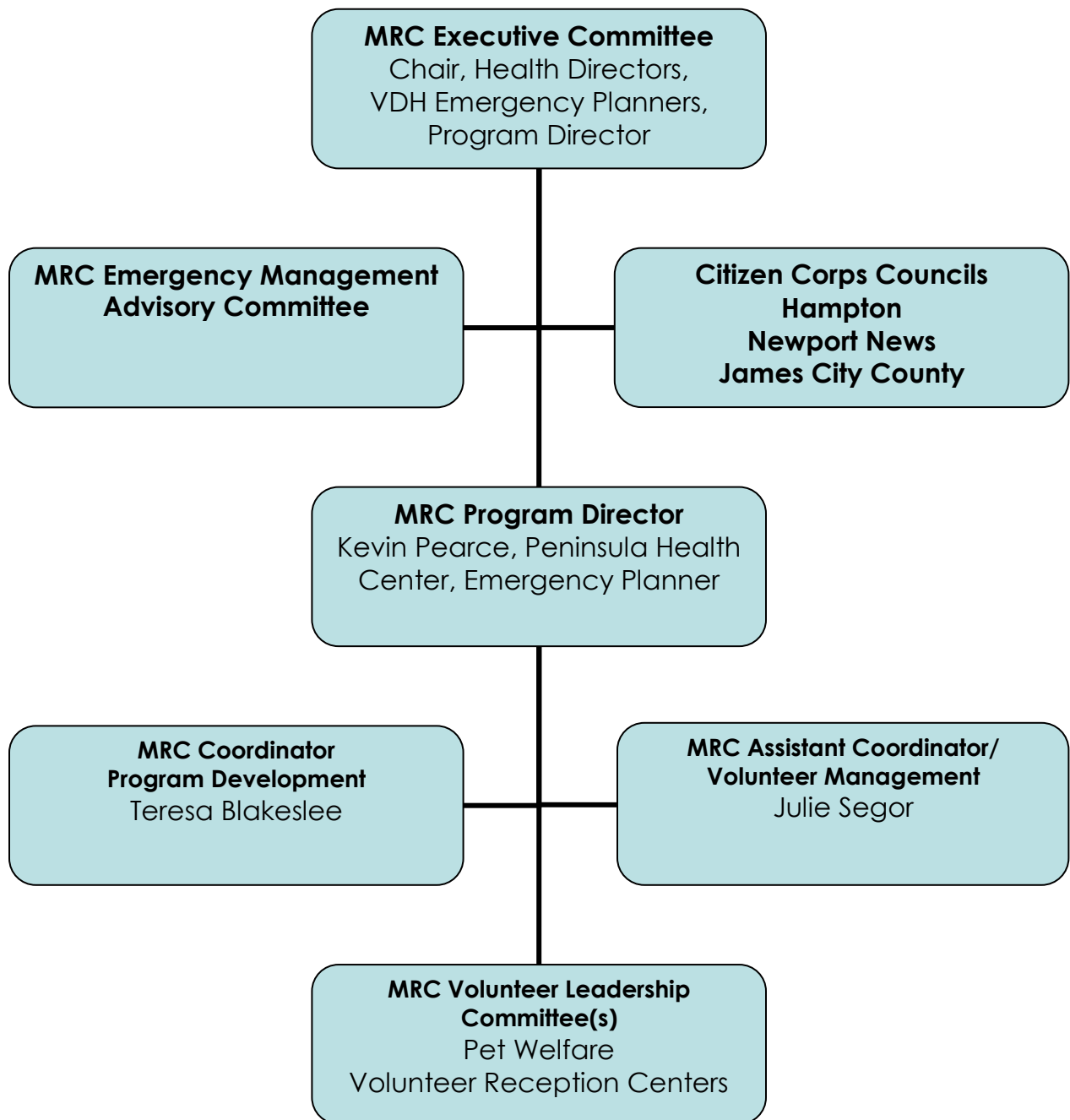


Julie Segor
Assistant MRC Coordinator/Volunteer Manager
Email: Julie.Segor@vdh.virginia.gov

Kevin Pearce
Emergency Planner, Peninsula Health District
Email: Kevin.pearce@vdh.virginia.gov
Office: 757.594.8787

Cort Jensen
Emergency Planner, Hampton Health District
Email: Cort.jensen@vdh.virginia.gov
Office: 757.727.1172 ext 141

Appendix A: Organizational Chart



Appendix B: Credentialing Matrix

NEW VOLUNTEER BACKGROUND/CREDENTIAL CATEGORIES				
ALL VOLUNTEERS SHOULD FIT ONE OF THE FOLLOWING LEVELS:	1 ADMINISTRATIVE OR LEADERSHIP/ DIRECT CARE VOLUNTEERS (most responsible and leadership positions in unit)	2 TRAINED POSITION ASSIGNED VOLUNTEERS (highest level of training, mid-leadership in unit)	3 ORIENTED NO POSITION VOLUNTEERS (lowest level of training and responsibility in unit)	4 VOLUNTEERS REGISTERED IN DATABASE (not trained or active with unit)
VDH HR and MRC REQUIREMENTS:	Standard MRC Reg Form (including consent/disclosure statement signed) DMV Form CRD93 Finger Print Cards/Form HP License Verification ID Verification In Person Interview	Standard MRC Reg Form (including consent/disclosure statement signed) HP License Verification ID Verification Optional Finger Print Cards Personal Interview	Standard MRC Reg Form (including consent/disclosure statement signed) HP License Verification ID Verification Optional Background	Standard MRC Reg Form (including consent/disclosure statement signed) License Verification
ADDED ESAR-VHP REQUIREMENTS:	Ed Verification MRC Certification Practice Information Privileges Information National Database DEA License References (2)	Ed Verification MRC Certification Practice Information Privileges Information National Database DEA License References (2)	Ed Verification MRC Certification Practice Information Privileges Information National Database DEA License References (2)	Ed Verification MRC Certification Practice Information Privileges Information National Database DEA License References (2)
<p>From Virginia Code/State Personnel Policies:</p> <p>"Volunteer" means any person who, of his own free will, provides goods or services, without any financial gain, to any agency, instrumentality or political subdivision of the Commonwealth;</p> <p>"Volunteer in State and Local Services" shall include, but not be limited to, any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS while engaged in emergency services and preparedness activities as defined in § 44-146.16.</p> <p>"Regular-service volunteer" means any person engaged in specific voluntary service activities on an ongoing or continuous basis;</p> <p>"Occasional-service volunteer" means any person who provides a one-time or occasional voluntary service</p> <p>"Level 1" is the lowest level and covers positions that involve an expectation of public trust or pose a significant degree of risk to patients, clients or the mission of the agency;</p> <p>"Level 2" is the intermediate level and covers positions involving a higher degree of public trust, posing a greater risk for causing damage to the public or the mission of the agency, or posing a significant risk for realizing personal gain from the public's business;</p> <p>"Level 3" is the highest level and covers positions that involve an unusually high expectation of public trust, pose an unusually high risk for causing extensive damage to the public or the mission of the agency, or pose an unusually high risk for realizing personal gain from the public's business.</p>				

Appendix C: State and Federal Liability Coverage

1. That §§ [2.2-3601](#), [2.2-3602](#), [2.2-3605](#), [8.01-225](#), [32.1-48.016](#), and [44-146.23](#) of the Code of Virginia are amended and reenacted as follows:

§ [2.2-3601](#). Definitions.

As used in this chapter, unless the context requires a different meaning:

"Volunteer" means any person who, of his own free will, provides goods or services, without any financial gain, to any agency, instrumentality or political subdivision of the Commonwealth;

"Volunteer in state and local services" shall include, but not be limited to, any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS while engaged in emergency services and preparedness activities as defined in § [44-146.16](#).

"Regular-service volunteer" means any person engaged in specific voluntary service activities on an ongoing or continuous basis;

"Occasional-service volunteer" means any person who provides a one-time or occasional voluntary service;

"Material donor" means any person who, without financial gain, provides funds, materials, employment, or opportunities for clients of agencies, instrumentalities, or political subdivisions of the Commonwealth;

"Department" includes all departments established in the executive branch of state government and local agencies under the jurisdiction or supervision thereof, and for the purposes of §§ [2.2-3602](#), [2.2-3604](#) and [2.2-3605](#), shall include political subdivisions of the Commonwealth.

§ [2.2-3602](#). Scope of chapter; status of volunteers; reimbursements.

A. Every department, through its executive head, may develop volunteer programs and accept the services of volunteers, including regular-service volunteers, occasional-service volunteers, or material donors, to assist in programs carried out or administered by that department.

B. Volunteers recruited, trained, or accepted by any department shall, to the extent of their voluntary service, be exempt from all provisions of law relating to state employment, hours of work, rate of compensation, leave time, and employee benefits except those enumerated in or consistent with § [2.2-3605](#). Volunteers shall, however, at all times comply with applicable work rules.

C. Every department utilizing the services of volunteers may provide volunteers with such incidental reimbursements as are consistent with the provisions of § [2.2-3605](#), including transportation costs, lodging, and subsistence, as the department deems appropriate to assist volunteers in performing their duties.

D. For the purposes of this chapter, individuals involved in emergency services and preparedness activities pursuant to the definition of "emergency services" in § [44-146.16](#) shall be considered volunteers in state and local services and shall be accordingly entitled to the benefits conferred in this chapter. As volunteers in state and local services, such individuals shall be deemed to be regular-service volunteers.

§ [2.2-3605](#). Volunteer benefits.

A. Meals may be furnished without charge to regular-service volunteers, *if* scheduled work assignments extend over an established meal period. Meals may be furnished without charge to occasional-service volunteers at the discretion of the department's executive head.

B. Lodging, if available, may be furnished temporarily, at no charge, to regular-service volunteers.

C. Transportation reimbursement may be furnished those volunteers whose presence is determined to be necessary to the department. Rates or amounts of such reimbursement shall not exceed those provided in § [2.2-2823](#). Volunteers may utilize state vehicles in the performance of their duties, subject to those regulations governing use of state vehicles by paid staff.

D. Liability insurance may be provided by the department utilizing their services both to regular-service and occasional-service volunteers to the same extent as may be provided by the department to its paid staff. Volunteers in state and local service, *including, but not limited to, any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS*, shall enjoy the protection of the Commonwealth's sovereign immunity to the same extent as paid staff.

§ [8.01-225](#). Persons rendering emergency care, obstetrical services exempt from liability.

A. Any person who:

1. In good faith, renders emergency care or assistance, without compensation, to any ill or injured person at the scene of an accident, fire, or any life-threatening emergency, or en route there from to any hospital, medical clinic or doctor's office, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such care or assistance.

2. In the absence of gross negligence, renders emergency obstetrical care or assistance to a female in active labor who has not previously been cared for in connection with the pregnancy by such person or by another professionally associated with such person and whose medical records are not reasonably available to such person shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care or assistance. The immunity herein granted shall apply only to the emergency medical care provided.

3. In good faith and without compensation, including any emergency medical services technician certified by the Board of Health, administers epinephrine in an emergency to an individual shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if such person has reason to believe that the individual receiving the injection is suffering or is about to suffer a life-threatening anaphylactic reaction.

4. Provides assistance upon request of any police agency, fire department, rescue or emergency squad, or any governmental agency in the event of an accident or other emergency involving the use, handling, transportation, transmission or storage of liquefied petroleum gas, liquefied natural gas, hazardous material or hazardous waste as defined in § [18.2-278.1](#) or regulations of the Virginia Waste Management Board shall not be liable for any civil damages resulting from any act of commission or omission on his part in the course of his rendering such assistance in good faith.

5. Is an emergency medical care attendant or technician possessing a valid certificate issued by authority of the State Board of Health who in good faith renders emergency care or assistance whether in person or by telephone or other means of communication, without compensation, to any injured or ill person, whether at the scene of an accident, fire or any other place, or while transporting such injured or ill person to, from or between any hospital, medical facility, medical clinic, doctor's office or other similar or related medical facility, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, treatment or assistance, including but in no way limited to acts or omissions which involve violations of State Department of Health regulations or any other state regulations in the rendering of such emergency care or assistance.

6. In good faith and without compensation, renders or administers emergency cardiopulmonary resuscitation, cardiac defibrillation, including, but not limited to, the use of an automated external

defibrillator, or other emergency life-sustaining or resuscitative treatments or procedures which have been approved by the State Board of Health to any sick or injured person, whether at the scene of a fire, an accident or any other place, or while transporting such person to or from any hospital, clinic, doctor's office or other medical facility, shall be deemed qualified to administer such emergency treatments and procedures and shall not be liable for acts or omissions resulting from the rendering of such emergency resuscitative treatments or procedures.

7. Operates an automated external defibrillator at the scene of an emergency, trains individuals to be operators of automated external defibrillators, or orders automated external defibrillators, shall be immune from civil liability for any personal injury that results from any act or omission in the use of an automated external defibrillator in an emergency where the person performing the defibrillation acts as an ordinary, reasonably prudent person would have acted under the same or similar circumstances, unless such personal injury results from gross negligence or willful or wanton misconduct of the person rendering such emergency care.

8. Is a volunteer in good standing and certified to render emergency care by the National Ski Patrol System, Inc., who, in good faith and without compensation, renders emergency care or assistance to any injured or ill person, whether at the scene of a ski resort rescue, outdoor emergency rescue or any other place or while transporting such injured or ill person to a place accessible for transfer to any available emergency medical system unit, or any resort owner voluntarily providing a ski patroller employed by him to engage in rescue or recovery work at a resort not owned or operated by him, shall not be liable for any civil damages for acts or omissions resulting from the rendering of such emergency care, treatment or assistance, including but not limited to acts or omissions which involve violations of any state regulation or any standard of the National Ski Patrol System, Inc., in the rendering of such emergency care or assistance, unless such act or omission was the result of gross negligence or willful misconduct.

9. Is an employee of a school board, authorized by a prescriber and trained in the administration of insulin and glucagon, who, upon the written request of the parents as defined in § [22.1-1](#), assists with the administration of insulin or administers glucagon to a student diagnosed as having diabetes who requires insulin injections during the school day or for whom glucagon has been prescribed for the emergency treatment of hypoglycemia shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such treatment if the insulin is administered according to the child's medication schedule or such employee has reason to believe that the individual receiving the glucagon is suffering or is about to suffer life-threatening hypoglycemia. Whenever any employee of a school board is covered by the immunity granted herein, the school board employing him shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the rendering of such insulin or glucagon treatment.

10. Renders emergency services and preparedness activities, as defined in § [44-146.16](#), as a member of a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS, in good faith and without compensation, shall not be liable for any civil damages for any act or omission resulting from the rendering of such emergency services and preparedness activities during any natural or man-made disasters or any other natural or man-made emergency, including any outbreak, potential epidemic, or epidemic of disease, unless the act or omission was the result of the person's gross negligence or willful misconduct.

B. Any licensed physician serving without compensation as the operational medical director for a licensed emergency medical services agency in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from the rendering of emergency medical services in good faith by the personnel of such licensed agency unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any person serving without compensation as a dispatcher for any licensed public or nonprofit emergency services agency in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from the rendering of emergency services in good faith by the

personnel of such licensed agency unless such act or omission was the result of such dispatcher's gross negligence or willful misconduct.

Any individual, certified by the State Office of Emergency Medical Services as an emergency medical services instructor and pursuant to a written agreement with such office, who, in good faith and in the performance of his duties, provides instruction to persons for certification or recertification as a certified basic life support or advanced life support emergency medical services technician shall not be liable for any civil damages for acts or omissions on his part directly relating to his activities on behalf of such office unless such act or omission was the result of such emergency medical services instructor's gross negligence or willful misconduct.

Any licensed physician serving without compensation as a medical advisor to an E-911 system in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering medical advice in good faith to establish protocols to be used by the personnel of the E-911 service, as defined in § [58.1-3813.1](#), when answering emergency calls unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any licensed physician who directs the provision of emergency medical services, as authorized by the State Board of Health, through a communications device shall not be liable for any civil damages for any act or omission resulting from the rendering of such emergency medical services unless such act or omission was the result of such physician's gross negligence or willful misconduct.

Any licensed physician serving without compensation as a supervisor of an automated external defibrillator in ~~this~~ *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering medical advice in good faith to the owner of the automated external defibrillator relating to personnel training, local emergency medical services coordination, protocol approval, automated external defibrillator deployment strategies, and equipment maintenance plans and records unless such act or omission was the result of such physician's gross negligence or willful misconduct.

C. Any provider of telecommunication service, as defined in § [58.1-3812](#), including mobile service, in *the* Commonwealth shall not be liable for any civil damages for any act or omission resulting from rendering such service with or without charge related to emergency calls unless such act or omission was the result of such service provider's gross negligence or willful misconduct.

Any volunteer engaging in rescue or recovery work at a mine or any mine operator voluntarily providing personnel to engage in rescue or recovery work at a mine not owned or operated by such operator, shall not be liable for civil damages for acts or omissions resulting from the rendering of such rescue or recovery work in good faith unless such act or omission was the result of gross negligence or willful misconduct.

D. Nothing contained in this section shall be construed to provide immunity from liability arising out of the operation of a motor vehicle.

E. (Expires July 1, 2005) 1. In the absence of gross negligence or willful misconduct, a health care provider shall not be liable in any civil action resulting from (i) injuries to any health care worker sustained in connection with administration of the vaccinia (smallpox) vaccine or other smallpox countermeasure, or (ii) any injuries to any other person sustained as a result of such other person coming into contact, directly or indirectly, with a health care worker; provided the vaccinia (smallpox) vaccine or smallpox countermeasure was administered and monitored in accordance with the recommendations of the Centers for Disease Control and Prevention in effect at the time of the vaccinia (smallpox) vaccine or other smallpox countermeasure administration. Nothing in this subsection shall preclude an injured health care worker, who is otherwise eligible for workers' compensation benefits pursuant to Title 65.2, from receipt of such benefits.

2. In the absence of gross negligence or willful misconduct, a health care worker shall not be liable in any civil action for injuries to any other person sustained as a result of such other person

coming into contact, directly or indirectly, with a health care worker, provided the vaccinia (smallpox) vaccine or smallpox countermeasure was administered and monitored in accordance with the recommendations of the Centers for Disease Control and Prevention in effect at the time of the vaccinia (smallpox) vaccine or other smallpox countermeasure administration.

3. For the purposes of this subsection, "-health care provider-" means a health care provider participating in a smallpox preparedness program, pursuant to a declaration by the United States Department of Health and Human Services ("HHS"), through which individuals associated with the health care provider have received the vaccinia (smallpox) vaccine or other smallpox countermeasure defined by HHS from any hospital, clinic, state or local health department, or any other entity that is identified by state or local government entities or the HHS to participate in a vaccination program.

4. For the purposes of this subsection, "health care worker" means a health care worker to whom the vaccinia (smallpox) vaccine or other smallpox countermeasure has been administered as part of a smallpox preparedness program pursuant to a declaration by HHS. Such health care workers shall include but shall not be limited to: (i) employees of a health care provider referenced in subdivision 3, (ii) independent contractors with a health care provider referenced in subdivision 3, (iii) persons who have practice privileges in a hospital, (iv) persons who have agreed to be on call in an emergency room, (v) persons who otherwise regularly deliver prehospital care to patients admitted to a hospital, and (vi) first responders.

F. For the purposes of this section, the term "compensation" shall not be construed to include (i) the salaries of police, fire or other public officials or personnel who render such emergency assistance, (ii) the salaries or wages of employees of a coal producer engaging in emergency medical technician service or first aid service pursuant to the provisions of §§ [45.1-161.38](#), [45.1-161.101](#), [45.1-161.199](#) or § [45.1-161.263](#), (iii) complimentary lift tickets, food, lodging or other gifts provided as a gratuity to volunteer members of the National Ski Patrol System, Inc., by any resort, group or agency, or (iv) the salary of any person who (a) owns an automated external defibrillator for the use at the scene of an emergency, (b) trains individuals, in courses approved by the Board of Health, to operate automated external defibrillators at the scene of emergencies, (c) orders automated external defibrillators for use at the scene of emergencies, or (d) operates an automated external defibrillator at the scene of an emergency.

For the purposes of this section, an emergency medical care attendant or technician shall be deemed to include a person licensed or certified as such or its equivalent by any other state when he is performing services which he is licensed or certified to perform by such other state in caring for a patient in transit in ~~this~~ *the* Commonwealth, which care originated in such other state.

Further, the public shall be urged to receive training on how to use cardiopulmonary resuscitation (CPR) and an automated external defibrillator (AED) in order to acquire the skills and confidence to respond to emergencies using both CPR and an AED.

§ [32.1-48.016](#). Immunity from liability.

Any person, including any person who serves in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS, who, in good faith and in the performance of his duties, acts in compliance with this article and the Board of Health's regulations shall not be liable for any civil damages for any act or omission resulting from such actions unless such act or omission was the result of gross negligence or willful misconduct.

§ [44-146.23](#). Immunity from liability.

4. Neither the Commonwealth, nor any political subdivision thereof, nor federal agencies, nor other public or private agencies, nor, except in cases of willful misconduct, public or private employees, nor representatives of any of them, engaged in any emergency services activities, while complying with or attempting to comply with this chapter or any rule, regulation, or

executive order promulgated pursuant to the provisions of this chapter, shall be liable for the death of, or any injury to, persons or damage to property as a result of such activities. The provisions of this section shall not affect the right of any person to receive benefits to which he would otherwise be entitled under this chapter, or under the Workers' Compensation Act (§ [65.2-100](#) et seq.), or under any pension law, nor the right of any such person to receive any benefits or compensation under any act of Congress. *For the purposes of the immunity conferred by this subsection, representatives of public or private employees shall include volunteers in state and local services who are persons who serve in a Medical Reserve Corps (MRC) unit or on a Community Emergency Response Team (CERT) established under VirginiaCORPS.*

B. Any person owning or controlling real estate or other premises who voluntarily and without compensation grants a license or privilege, or otherwise permits the designation or use of the whole or any part or parts of such real estate or premises for the purpose of sheltering persons, of emergency access or of other uses relating to emergency services shall, together with his successors in interest, if any, not be liable for negligently causing the death of, or injury to any person on or about such real estate or premises or for loss of or damage to the property of any person on or about such real estate or premises during such actual or impending disaster.

C. If any person holds a license, certificate, or other permit issued by any state, or political subdivision thereof, evidencing the meeting of qualifications for professional, mechanical, or other skills, the person may gratuitously render aid involving that skill in ~~the~~ Commonwealth during a disaster, and such person shall not be liable for negligently causing the death of, or injury to, any person or for the loss of, or damage to, the property of any person resulting from such gratuitous service.

D. No person, firm or corporation which gratuitously services or repairs any electronic devices or equipment under the provisions of this section after having been approved for the purposes by the State Coordinator shall be liable for negligently causing the death of, or injury to, any person or for the loss of, or damage to, the property of any person resulting from any defect or imperfection in any such device or equipment so gratuitously serviced or repaired.

E. Notwithstanding any law to the contrary, no individual, partnership, corporation, association, or other legal entity shall be liable in civil damages as a result of acts taken voluntarily and without compensation in the course of rendering care, assistance, or advice with respect to an incident creating a danger to person, property, or the environment as a result of an actual or threatened discharge of a hazardous substance, or in preventing, cleaning up, treating, or disposing of or attempting to prevent, clean up, treat, or dispose of any such discharge, provided that such acts are taken under the direction of state or local authorities responding to the incident. This section shall not preclude liability for civil damages as a result of gross negligence, recklessness or willful misconduct. The provisions of this section shall not affect the right of any person to receive benefits to which he would otherwise be entitled under this chapter, or under the Workers' Compensation Act (§ [65.2-100](#) et seq.), or under any pension law, nor the right of any such person to receive any benefits or compensation under any act of Congress. The immunity provided by the provisions of this paragraph shall be in addition to, not in lieu of, any immunities provided by § [8.01-225](#).

PRIOR to March 2005, information on liability coverage was included in the "Liability Statement" provided by legal council to the VDH, with a place for volunteers to read and document that they were given this information.

14.3.1 Federal Laws

14.3.1 The National MRC suggests that there are some protections for volunteers under the Good Samaritan Laws, the Volunteer Protection Act.

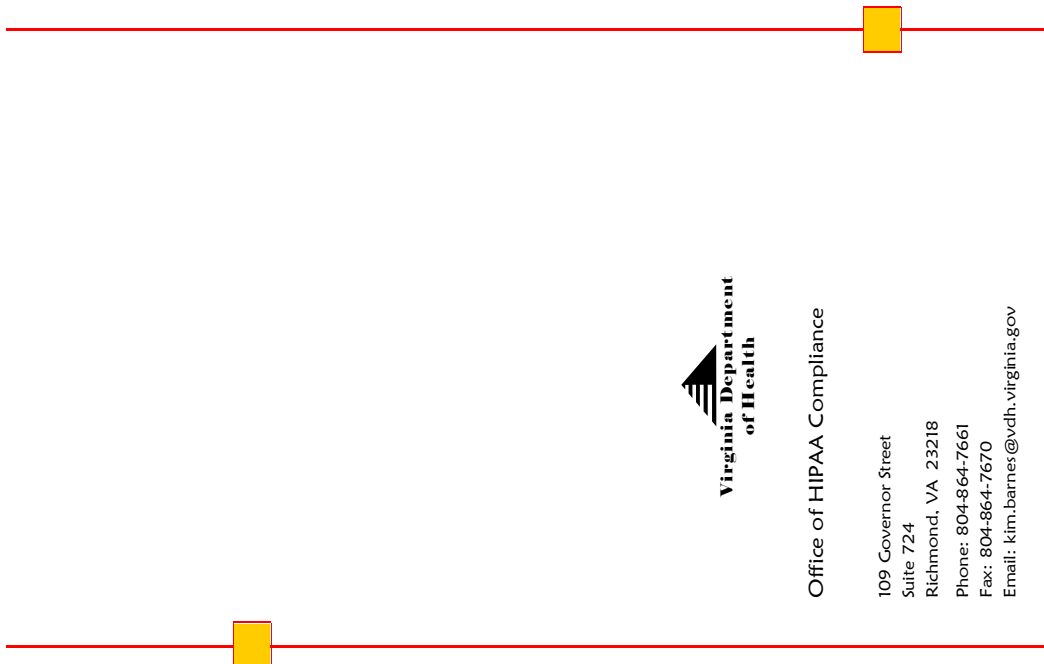
14.3.2 The VPA provides qualified immunity from liability for volunteers and, subject to exceptions, preempts inconsistent state laws on the subject, except for those that provide protections that are stronger than those in the VPA.

14.3.3 The VPA defines a volunteer as "an individual performing services for a nonprofit organization or a governmental entity which does not receive compensation (other than reasonable reimbursement or allowance for expenses actually incurred) or any other thing of value in lieu of compensation in excess of \$500 per year.

14.3.4 Under the VPA a volunteer is immune from liability for harm caused by an act of omission of the volunteer on behalf of the organization or entity if:

- 1) the act or omission was within the scope of the volunteer's responsibilities in the organization or entity;
- 2) if required, the volunteer was properly licensed, certified or authorized for the activities or practice giving rise to the claim;
- 3) the harm was not caused by "willful or criminal misconduct, gross negligence, reckless misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer"
- 4) the harm was not caused by the volunteer's operation of a motor vehicle, vessel, aircraft, or other vehicle requiring the operator to possess a license or maintain insurance.

Appendix D: HIPAA Compliance Brochure/Statement (to be signed by volunteer)



Acknowledgement

Please read, sign, and date this acknowledgement. Please return this brochure to your Supervisor.

I have read and understand the information in this brochure. I realize that there are civil and criminal penalties for the unauthorized use and disclosure of PHI. I will abide by the guidelines when performing my duties at the Department of Health.

Signature of Student/Volunteer _____

Print Name _____

Date _____

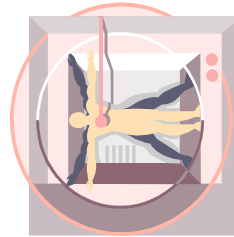
Signature of Supervisor _____

Name of School/Volunteer Program _____

VDH VIRGINIA DEPARTMENT OF HEALTH
Protecting You and Your Environment

What You Need to Know

- As a student/volunteer performing duties for the Virginia Department of Health, you will have access to the protected health information (PHI) of our patients. The fact that an individual is or was a patient of the Virginia Department of Health is PHI.
- Federal and state laws, including HIPAA and our policies and procedures, protect the privacy and security of this PHI.
- It is illegal for you to use or disclose PHI outside the scope of your student/volunteer duties for the Virginia Department of Health. This includes oral, written, or electronic uses and disclosures.



HIPAA Protects Patient Privacy

Guidelines for the Use of PHI

- You may use PHI as necessary to carry out your duties as a student/volunteer.
- You may share PHI with other health care providers for treatment purposes.
- You may NOT photocopy PHI.
- You must access only the minimum amount of PHI necessary to care for a patient or to carry out an assignment.
- You may NOT record PHI (such as patient names, diagnoses, dates of birth, addresses, phone numbers, etc.) on any assignments you may need to turn into your instructor, reports you may need to turn in to your program, or forms you may need to take with you.
- You may only access the PHI of patients for whom you are caring/volunteering when there is a need for the PHI.
- Be aware of your surroundings when discussing PHI. For example, because others may overhear you, it is inappropriate to discuss PHI in bathrooms, lunch areas or in

any other public place.

- When disposing of any documents with PHI, do NOT put them into a waste can. Instead, place discarded documents with PHI into containers marked for shredding.
- If you have questions about the use or disclosure of PHI, contact the health district's Privacy Officer.



Office of HIPAA Compliance

109 Governor Street
Suite 724
Richmond, VA 23218
Phone: 804-864-7661
Fax: 804-864-7670
Email: kim.barnes@vdh.virginia.gov



Appendix E: MRC VOLUNTEER Signature Sheet

Volunteer's Printed First and Last Name: _____

Volunteer Liability

I acknowledge that I have read and understand the MRC Volunteer Liability Statement provided in the PENINSULA Medical Reserve Corps Policies. I understand that my participation in non-emergency events is on behalf of the Commonwealth of Virginia, Virginia Dept. of Health, and the Peninsula and Hampton Health Districts, and that I am performing activities under the direction of the LHD Director.

Volunteer Signature Date

HIPAA

I have read and understand the information provided in the VDH HIPAA & Students/Volunteers provided by the MRC unit and VDH. I realize that there are civil and criminal penalties for the unauthorized use and disclosure of PHI. I will abide by the guidelines when performing my duties as a MRC volunteer.

Volunteer Signature Date

MRC Policies

I have read and understand the information provided in the PENINSULA Medical Reserve Corps Policies. I will abide by the policies when performing my duties as a MRC volunteer.

Volunteer Signature Date

MRC Coordinator Signature Date

Please sign and return to:

MRC Coordinator/Volunteer Management

Virginia Dept. of Health - Peninsula Medical Reserve Corps
416 J. Clyde Morris Blvd. | Newport News, VA 23601
FAX: 757-594-8612



Appendix F: MRC VOLUNTEER Background Check Authorization Form

Volunteer's Printed First, Middle and Last Name: _____

Volunteer's Printed Maiden Name: _____

Other names currently or previously used: _____

Volunteer's Social Security Number

Providing the social security number is voluntary; however, it is a screening tool that is used for this request to be processed in a timelier manner, especially in the event of an emergency/disaster. Failure to provide this number may result in an inability to process this request due to multiple records with similar names and demographics. Without this additional identifier, the form may be returned to the requestor unprocessed, and the applicant will be required to submit a set of fingerprints along with this request form to determine if this applicant has a criminal record. Numbers provided will be used to help identify the proper record and will be used for no other purpose.

Volunteer's Social Security Number:

_____ - _____ - _____

Volunteer's Gender:

___ **Male** ___ **Female**

Volunteer's Race:

Volunteer's Date of Birth:

_____/_____/_____

I authorize the Medical Reserve Corps to utilize this information for the sole purpose of conducting a background investigation for purposes of volunteering with Peninsula MRC for emergency and non-emergency events. I also hold harmless any individuals from any liability for damages resulting from this authorization.

Volunteer Signature

Date

MRC Coordinator Signature

Date

Sign below if you do not authorize a background investigation check:

Background Check Refusal - Volunteer Signature

Date

Please sign and return to:

MRC Coordinator/Volunteer Management

At the time of your Peninsula MRC Classroom Orientation

Or deliver to:

Virginia Dept. of Health - Peninsula Medical Reserve Corps

416 J. Clyde Morris Blvd. | Newport News, VA 23601

This document shall be maintained in a secure file.